

No. 01-98DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Zenovia Sodor Parry
 Sex F Date of Death February 9, 1998
 Place of Death Southborough, 22 Main St

Date of Birth October 23, 1943

Immediate Cause Advanced Liver Metastasis

Certifier Mary Costanza M.D.

Permit Issued To Morris Funeral Home

Disposition At Rural Cemetery Southboro

Name of Facility Rural Cemetery

Date Permit Issued 2/12/98

No. 01-98DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed
 to Town Clerk
 (Office issuing permit)

City or Town of Southborough Mass.

Name of Decedent Zenovia Sodor Parry

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
 (Name of cemetery or crematory) (City or Town)

on February 14, 1998

Final Disposition Sec.1-C, Lot1, Grave #2

Certified by _____
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 02-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Richard K. Collette
Sex Male Date of Death March 9, 1998
Place of Death Southborough, MA 93 Pine Hill Rd
Date of Birth September 19, 1935
Immediate Cause Mesothelioma, Metastatic
Certifier Anthony L. Boral, M.D.
Permit Issued To Morris Funeral Home
Disposition At Rural Cemetery Southboro
Name of Facility Morris Funeral Home
Date Permit Issued March 11, 1998

No. 02-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Southborough Town Clerk
(Office issuing permit)
City or Town of Southborough Mass.
Name of Decedent Richard K. Colletti
If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms
at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)
on March 13, 1998
Final Disposition Sec. 2, Lot 38C, Grave #1
Certified by [Signature] (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 03-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Karen L. Walsh
Sex F Date of Death March 12, 1998
Place of Death Southborough, MA
Date of Birth April 16, 1947
Immediate Cause Metastatic Colon Cancer
Certifier Christopher N. Seidler M.D.
Permit Issued To Nancy Morris Morris Funeral Home
Disposition At Rural Cemetery
Name of Facility Morris Funeral Home
Date Permit Issued March 16, 1998

No. 03-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed
to Southborough Town Clerk
(Office issuing permit)
City or Town of Southborough Mass
Name of Decedent Karen L. Walsh
If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms
at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)
on March 16, 1998
Final Disposition Sec B-East Lot 16 Grave #5
Certified by [Signature] Gillman
(Signature of Superintendent, cemetery or crematory)
If there is no officer in charge, funeral director must sign and return this stub.

No. 04-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Edward A. Angelico

Sex M Date of Death March 14, 1998

Place of Death Southborough, MA 20 Central St

Date of Birth June 18, 1918

Immediate Cause Stroke

Certifier Peter M. Brem M.D.

Permit Issued To Morris Funeral Home 40 Main St

Disposition At Rural Cemetery, Southborough, MA

Name of Facility Morris Funeral Home 40 Main St Southborough

Date Permit Issued March 16, 1998

No. 04-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass

Name of Decedent Edward A. Angelico

If a U.S. War Veteran, specify what war, organization, etc.

WWII

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)

on March 17, 1998

Final Disposition Sec. R-East, Lot 12 Grave #4

Certified by [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 05-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Arthur Ivison Schofield
Sex M Date of Death April 2, 1998
Place of Death Southborough 236 Parkerville Rd
Date of Birth August 7, 1925
Immediate Cause Metastatic Cholangiocarcinoma
Certifier Edward Kamans M.D.
Permit Issued To John C Bryant
Disposition At Weston, MA
Name of Facility Linwood Cemetery
Date Permit Issued 4/3/98

No. 05-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit) 01772
City or Town of Southborough Mass.
Name of Decedent ARTHUR IVISON Schofield
If a U.S. War Veteran, specify what war, organization, etc.
=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms
at LINWOOD CEMETERY, WESTON
(Name of cemetery or crematory) (City or Town)
on April 6, 1998
Final Disposition BURIAL-Vault Lot 654
Certified by David J. Supt
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 06-98

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

Stub to be retained by officer issuing permit

Name of Decedent MARY-JANE F. Boland
Sex F Date of Death April 10, 1998
Place of Death Southborough, MA 35 EAST MAIN ST
Date of Birth August 18, 1932
Immediate Cause Acute MYOCARDIAL Infarction
Certifier Shyla Shrinath M.D.
Permit Issued To MORRIS FUNERAL HOME
Disposition At Southborough, MA
Name of Facility RURAL Cemetery
Date Permit Issued April 14, 1998

No. 06-98

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT**

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)
City or Town of Southborough Mass.
Name of Decedent MARY-JANE F. Boland
If a U.S. War Veteran, specify what war, organization, etc.
- - -

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms
at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)
on April 15, 1998
Final Disposition Sec. 15, Lot 8, Grave #4
Certified by Bridget J. Williams
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

07-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent JOAN Kathleen Ford
Sex F Date of Death MAY 13, 1998
Place of Death Southborough, MA
Date of Birth February 3, 1947
Immediate Cause RESPIRATORY ARREST
Certifier MARY-ELLEN TAPLIN M.D.
Permit Issued To Nancy Morris / Morris Funeral Home
Disposition At Southborough, MA
Name of Facility Rural Cemetery
Date Permit Issued May 14, 1998

07-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)
City or Town of Southborough Mass.
Name of Decedent JOAN Kathleen Ford
If a U.S. War Veteran, specify what war, organization, etc.

=====

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms
at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)
on May 16, 1998
Final Disposition Sec. 1, Lot 11/C, Grave #1
Certified by Mary-ellen Taplin
(Signature of Superintendent, cemetery or crematory)
If there is no officer in charge, funeral director must sign and return this stub.

08-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Margaret B PearsonSex Female Date of Death June 5 1998Place of Death SouthboroughDate of Birth October 1, 1914Immediate Cause Cardiopulmonary ArrestCertifier STEVEN FINE M.D.Permit Issued To MORRIS Funeral HomeDisposition At Newton CrematoryName of Facility Newton CrematoryDate Permit Issued June 6 1998

08-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Bee Town Church

(Office issuing permit)

City or Town of Southboro Mass.Name of Decedent Margaret Pearson

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Newton Crematory Newton
(Name of cemetery or crematory) (City or Town)on 6/9/98

Final Disposition

Certified by [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

09-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT*Stub to be retained by officer issuing permit*Name of Decedent Patricia A. DudleySex F Date of Death September 17, 1998Place of Death SouthboroughDate of Birth March 30, 1945Immediate Cause Respiratory failureCertifier Dolly Geevarghese M.D.Permit Issued To Morris Funeral HomeDisposition At BurialName of Facility Morris Funeral HomeDate Permit Issued Sept. 18, 1998

09-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT*This section to be returned immediately, properly endorsed*to Southboro Town Clerk
(Office issuing permit)City or Town of Southboro Mass.Name of Decedent Patricia A. Dudley

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

*(To be filled in by cemetery or crematory official)*I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)on September 19, 1998Final Disposition Sec. 4, Lot 2, Grave #4Certified by [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

10-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent MARIA Sochor
 Sex F Date of Death November 15, 1998
 Place of Death Southborough, MA 20 Main ST
 Date of Birth June 16, 1916
 Immediate Cause Cardiac Arrest
 Certifier Jocelyne Caplow M.D.
 Permit Issued To Morris Funeral Home
 Disposition At Southborough, MA
 Name of Facility Rural Cemetery
 Date Permit Issued November 17, 1998

10-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to

Southborough Town Clerk
(Office issuing permit)

City or Town of

Southborough

Mass.

Name of Decedent

MARIA Sochor

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)on November 21, 1998Final Disposition Sec. 1, Lot 11-B, Grave #2

Certified by

Dwight Gilleney
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

11-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
Decedent

Joyce Anne Hickey

Sex F Date of Death

November 23, 1998

Place of
Death49 Southville Road
Southborough, MADate of
Birth

June 12, 1937

Immediate
Cause

Respiratory Failure

Certifier

Dr. Anthony C. Howes, M.D.

Permit
Issued To

November 24, 1998

Disposition
At

Attleboro, MA

Name of
Facility

North Purchase Crematory

Date Permit
Issued

November 24, 1998

11-98

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to

Southborough Town Clerk
(Office issuing permit)

City or Town of

Southborough

Mass

Name of Decedent

Joyce ANNE Hickey

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms

at

NORTH PURCHASE ATTLEBORO

(Name of cemetery or crematory)

(City or Town)

on

NOVEMBER 27 1998

Final Disposition

CREMATED

Certified by

Evano Simone

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
DecedentSex M Date of DeathPlace of
DeathDate of
BirthImmediate
Cause

Certifier

Permit
Issued ToDisposition
AtName of
FacilityDate Permit
IssuedDISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southboro Mass.Name of Decedent Paul Francis Morris

If a U.S. War Veteran, specify what war, organization, etc.

Korean

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Newton Crematory Newton
(Name of cemetery or crematory) (City or Town)on 11/30/98

Final Disposition

Certified by [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Shirley B. MACHICOSTAS
 Sex F Date of Death JANUARY 20, 1999 Hill Rd
 Place of Death Southborough, 39 Breakneck
 Date of Birth April 15, 1936
 Immediate Cause ACUTE respiratory Failure
 Certifier DR. JACK LEITNER M.D.
 Permit issued To Morris Funeral Home
 Disposition At Rural Cemetery
 Name of Facility Southborough, MA
 Date Permit issued 1/22/99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
 (Office issuing permit)
 City or Town of Southborough Mass.
 Name of Decedent Shirley B. Machicostas
 If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
 disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
 (Name of cemetery or crematory) (City or Town)
 on January 25, 1999

Final Disposition Section F, Box # 110

Certified by Robert L. Gillman
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

02-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Ottavio RosettiSex M Date of Death Feb 2, 1999Place of Death SouthboroughDate of Birth ItalyImmediate Cause Ischemic CardiomyopathyCertifier David Lortin M.D.Permit Issued To American Cremation SocietyDisposition At Linwood CrematoryName of Facility American Cremation SocietyDate Permit Issued February 3, 1999

02-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMITThis section to be returned immediately, properly endorsed
to Town Clerk
(Office issuing permit)City or Town of Southborough Mass:Name of Decedent Ottavio Rosetti

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

CREMATION

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Linwood Cemetery-Crematory, Haverhill MA
(Name of cemetery or crematory) (City or Town)on FEB - 4 1999

Final Disposition

Certified by Michael Kenney
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Arthur Herbert Melin e, Jr.

Sex M Date of Death April 17, 1920

Place of Death Southborough

Date of Birth February 11, 1999

Immediate Cause Cancer of Liver

Certifier Peter M. Brem M.D.

Permit Issued To Nancy Morris / Richard S. Monshell

Disposition At Rural Crematory

Name of Facility Frank H. Miles Co.

Date Permit Issued February 12, 1999

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Edward J. Clark
(Office issuing permit)

City or Town of Southborough Mass.

Name of Decedent Arthur Herbert Melin e, Jr.

If a U.S. War Veteran, specify what war, organization, etc.

WW II

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body of the decedent, permit was disposed of in accordance with the terms of the permit.

at Rural Crematory
150 Grove Street
Worcester, MA 01605
(Name of cemetery or crematory) (City or Town)

on FEB 15 1999

Final Disposition

Certified by Arthur J. Scanlon
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No.

04-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
Decedent

Sex F Date of Death

Place of
DeathDate of
BirthImmediate
Cause

Certifier

Permit
Issued ToDisposition
AtName of
FacilityDate Permit
Issued

Marion G. Connor

Feb. 22, 1999

Southboro, MA

Feb 27, 1904

Congestive heart failure

Robert C. Sumner

M.D.

John P. Rowe, Jr.

Rural Cemetery

John Rowe Funeral Home

February 22, 1999

R-309

No.

04-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to

Town Clerk

(Office issuing permit)

City or Town of

Southborough

Mass

Name of Decedent

Marion G. Connor

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)

on February 25, 1999

Final Disposition Section 1-A, Lot Ewest, Grv#3

Certified by

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

05-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Irene Fratus
 Sex F Date of Death June 12, 1999
84 main st
 Place of Death Southborough, MA
 Date of Birth January 17, 1910
 Immediate Cause Cardiac arrest
 Certifier Nadia L. Rodberg M.D.
 Permit Issued To Morris Funeral Home
 Disposition At Rural Cemetery
 Name of Facility Southboro
 Date Permit Issued 6/15/99

05-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Southboro Town Clerk
 (Office issuing permit)

City or Town of Southborough Mass:
 Name of Decedent Irene Fratus

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
 (Name of cemetery or crematory) (City or Town)

on June 17, 1999

Final Disposition Sec. 12, Lot 29, Grave #3

Certified by Bridget C. Gallen
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

06-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Annabelle R. MacleodSex F Date of Death June 13, 1999Place of Death SouthboroughDate of Birth August 27, 1909Immediate Cause Congestive Heart FailureCertifier Edward B. Jaffe M.D.Permit Issued To Thomas H. HaysDisposition At Maplewood CemeteryName of Facility Leland Hays F.H.Date Permit Issued June 15, 1999

06-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southboro Mass.Name of Decedent Annabelle R. Macleod

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat MAPLEWOOD CEMETERY MARLBOROUGH
(Name of cemetery or crematory) (City or Town)on JUNE 18, 1999Final Disposition LOT 1007Certified by Rakot K. Kaur
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

07-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of
Decedent

Oscar Decoteau

Sex

M

Date of Death

June 15, 1999

Place of
Death

Southborough

Date of
Birth

November 12, 1940

Immediate
Cause

Cardiac Arrhythmia

Certifier

Graham Putnam & Mahoney
Jennifer Lipman M.D.Permit
Issued To

Graham Putnam & Mahoney

Disposition
AtNew Swedish Cemetery
Worcester, MAName of
Facility

Graham Putnam & Mahoney

Date Permit
Issued

June 22, 1999

No. 08-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Stanley Cislo
Sex M Date of Death August 16, 1999
Place of Death Southborough
Date of Birth April 28, 1937
Immediate Cause Lung Cancer
Certifier Rares F. Dias M.D.

Permit Issued To J.J. Shepherd & Sons, Inc
Disposition At Mayflower Cemetery
Name of Facility J.J. Shepherd & Sons
Date Permit Issued August 17, 1999

No. 08-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)
City or Town of Southboro Mass.
Name of Decedent Stanley Cislo
If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms

at (Name of cemetery or crematory) (City or Town)
on AUG 19 1999
Mayflower Cemetery, Duxbury, Mass.
Final Disposition Ave. MAPLE 4-344 Cr
Certified by (Signature of Superintendent of cemetery or crematory)
If there is no officer in charge, funeral director must sign and return this stub.

No. 09-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Manik ChandraSex M Date of Death August 18, 1997Place of Death SouthboroughDate of Birth June 2, 1955Immediate Cause Hanging (skeltonized remains)Certifier William Zone, Examiner M.D.Permit Issued To Nordgren Corrigan MargeeDisposition At Rural Cemetery CrematoryName of Facility Nordgren, Corrigan MargeeDate Permit Issued August 20, 1997

R-309

No. 09-99

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of Decedent Manik Chandra

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms Rural Crematoryat 180 Grove Street
(Name of cemetery or crematory) Worcester, MA 01605on AUG 20 1999

Final Disposition

Certified by Arthur T Scanlon
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Ricky Van AndrewsSex M Date of Death 9/2/99Place of Death SouthboroughDate of Birth January 18, 1960Immediate Cause Blunt Trauma of HeadCertifier Alexander Chirkov M.D.Permit Issued To Henderson Funeral HomeDisposition At Oak Grove CemeteryName of Facility Henderson Funeral HomeDate Permit Issued September 9, 1999DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of Decedent Ricky Van Andrews

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Oak Grove Cemetery
(Name of cemetery or crematory) of Springfield, Inc. (City or town)on Sept. 11, 1999Final Disposition buried
JOHN A. HOFFMANCertified by SUPT.
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

01/2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Adeline Schild

Sex F Date of Death JANUARY 7, 2000

Place of Death Southborough 11 John St

Date of Birth March 11, 1924

Immediate Cause Cardiac Arrest

Certifier Nadia L. Robberg, M.D.

Permit Issued To Scott R. Homel
Nadia L. Robberg,

Disposition At Cremation

Name of Facility Duxbury Cremation

Date Permit Issued January 11, 2000

01/2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to

(Office issuing permit)

City or Town of

Mass.

Name of Decedent

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms

at

(Name of cemetery or crematory)

(City or Town)

on

Final Disposition

Certified by

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***This section to be returned immediately, properly endorsed*

to Town Clerk
(Office issuing permit)

City or Town of Southboro Mass.

Name of Decedent Adeline F. Schild

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its terms

at Duxbury Crematory, Duxbury, MA
(Name of cemetery or crematory) (City or Town)

on January 13, 2000

Southborough Rural Cemetery
Final Disposition Sec. 9, Lot 16A, Grv#1B (cremains)

Certified by 
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

02/2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Anna Jenny Marie Kallander
 Sex F Date of Death February 15, 2000
 Place of Death Southborough 18 Meadow Lane
 Date of Birth September 19, 1902
 Immediate Cause Congestive Heart Failure
 Certifier Christopher Scola M.D.

Permit Issued To Morris Funeral Home

Disposition Cremation
 At

Name of Facility Rural Cemetery, Worcester

Date Permit Issued February 16, 2000

02-2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
 (Office issuing permit)

City or Town of Southboro Mass.

Name of Decedent Anna Kallander

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
 disposed of in accordance with the laws of the State of Massachusetts

at Rural Crematory
180 Grove Street
 (Name of cemetery or crematory) (City or Town)
Worcester, MA 01605
 on **FEB 17 2000**

Final Disposition

Certified by Anthony J. Scola
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

03-2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Roland A. Messier

Sex M Date of Death February 26, 2000

Place of Death Southborough, 6 Cross St

Date of Birth December 27, 1911

Immediate Cause Myocardial Infarction

Certifier Neal M. Fallis M.D.

Permit Issued To John P. Rowe, Funeral Home

Disposition At Burial

Name of Facility Rural Cemetery

Date Permit Issued Feb 28, 2000

03-2000

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to

Town Clerk

(Office issuing permit)

City or Town of

Southborough

Mass.

Name of Decedent

Roland A. Messier

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Rural Cemetery Southborough, MA

(Name of cemetery or crematory)

(City or Town)

on February 29, 2000Final Disposition Sec. 1, Lot 31A, Grave #1

Certified by

(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

04-00

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Frank John DouglasSex M Date of Death April 1, 2000Place of Death SouthboroughDate of Birth April 26, 1921Immediate Cause SepsisCertifier Michelle Zheng M.D.Permit Issued To Eugene D. McCarthy, Jr.Disposition At BurialName of Facility St. Stephen's CemeteryDate Permit Issued April 3, 2000

04-00

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)City or Town of Southborough Mass.Name of Decedent FRANK JOHN DOUGLAS

If a U.S. War Veteran, specify what war, organization, etc.

WW II

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat St. Stephen Cem. Framingham
(Name of cemetery or crematory) (City or Town)on 4/3/00Final Disposition sect. 2, lot 86-87 # 6 of 9Certified by Richard Dunning
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

05-00

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent John L. Cochrane

Sex M Date of Death April 14, 2000

Place of Death Southborough

Date of Birth Arlington, April 7, 1939

Immediate Cause Cardiac Arrhythmia

Certifier William M. Keltyle M.D.

Permit Issued To Morris

Disposition At Rural Cemetery

Name of Facility Morris Funeral Home

Date Permit Issued April 15, 2000

05-00

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of Decedent John L. Cochrane

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)

on April 18, 2000

Final Disposition Sec. 2, Lot 29C, Grave #1

Certified by Bridget A. Galleney
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

No. 01-01

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Tammym. Kinzler

Sex F Date of Death March 1 2001

Place of Death 376 Turnpike Road Rm. 201
Southborough, MA

Date of Birth March 21, 1961

Immediate Cause Pending Toxicology

Certifier Jennifer K. Lipman M.D.

Permit Issued To Charles Aufiero

Disposition At Cambridge Com Cambridge

Name of Facility Donovan Aufiero F. H.

Date Permit Issued March 7, 2001

No. 01-01

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk
(Office issuing permit)

City or Town of Southborough Mass.

Name of Decedent Tammym. Kinzler

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Cambridge Cemetery Cambridge
(Name of cemetery or crematory) (City or Town)

on March 8, 2001

Final Disposition

Certified by James J. Ryan
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Herman L. Monette

Sex M Date of Death April 13, 2001

Place of Death Southborough, MA

Date of Birth Dec. 3, 1924

Immediate Cause Congestive Heart Failure

Certifier Deborah Riester M.D.

Permit Issued To Nancy G. Morris

Disposition At Rural Cemetery, Southborough, MA

Name of Facility Morris Funeral Home

Date Permit Issued April 17, 2001

DISPOSITION, REMOVAL AND TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk's Office
(Office issuing permit)

City or Town of Southborough Mass

Name of Decedent Herman L. Monette

If a U.S. War Veteran, specify what war, organization, etc.

WW II

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery Southborough, MA
(Name of cemetery or crematory) (City or Town)

on April 17, 2001

Final Disposition Sec. A, Lot 121 Grave #8

Certified by Sargent G. Gallaway
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*

Name of Decedent Bert Alonzo Farris, Jr.

Sex M Date of Death April 23, 2001

Place of Death Southborough, MA-

Date of Birth April 8, 1934

Immediate Cause Multiple ^{Blunt} Traumatic Injuries

Certifier Jennifer K. Lipman M.D.

Permit Issued To Guy B. Dostie

Disposition At Maine Veteran Memorial Cemetery, August, Maine
Pinette Funeral Homes

Name of Facility 87 Bartlett St. Lewiston, ME

Date Permit Issued April 26, 2001

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Irene Maryann Thivierge
 Sex F Date of Death May 6, 2001
 Place of Death Southborough
 Date of Birth September 28, 1916
 Immediate Cause Metastatic Lung Cancer
 Certifier John Clark M.D.
 Permit Issued To Roland W. Martin
Haverhill, MA
 Disposition At Linwood Crematory
 Name of Facility R.W. Martin F.H.
308 Paotucket St. Lowell, MA
 Date Permit Issued May 7, 2001 01854

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk's Office
 (Office issuing permit) 01772
 City or Town of Southborough Mass.
 Name of Decedent Irene Maryann Thivierge
 If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

CREMATION

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
 disposed of in accordance with its terms

at Linwood Cemetery-Crematory, Haverhill, MA
 (Name of cemetery or crematory) (City or Town)
 on MAY - 8 2001

Final Disposition _____

Certified by Michael Kennedy
 (Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Charles Geoffrey Merrill

Sex M Date of Death March 8 1989

Place of Death Providence, Rhode Island

Date of Birth July 22 1954

Immediate Cause Multiple Fractures & Internal Injuries

Certifier M.D.

Permit Issued To Bridget Gilleney, Supervisor of Rural Cemetery

Disposition At Rural Cemetery, Southborough, MA

Name of Facility Bridget Gilleney, Supervisor of Rural Cemetery

Date Permit Issued June 11, 2001

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk's Office
(Office issuing permit)

City or Town of Southborough, Mass.

Name of Decedent Charles Geoffrey Merrill

If a U.S. War Veteran, specify what war, organization, etc.

ENDORSEMENT

(To be filled in by cemetery or crematory official)

cremated

I hereby certify that the body accompanying this permit was disposed of in accordance with its terms

at Rural Cemetery, Southborough, MA
(Name of cemetery or crematory) (City or Town)

on June 11, 2001

Final Disposition Section F, Grave #52A

Certified by Bridget Gilleney
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

Stub to be retained by officer issuing permit

Name of Decedent Norman E. WellmanSex M Date of Death Sept. 21, 2001Place of Death May 12, 1925 SouthboroughDate of Birth May 12, 1925Immediate Cause Cerebrovascular accidentCertifier Glenn R. Randall M.D.Permit Issued To Thomas F. CroninDisposition At Rural Crematory, Worcester, MAName of Facility Callanan F. 16.34 Church St. Hopkinton MADate Permit Issued September 24, 2001DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT

This section to be returned immediately, properly endorsed

to Town Clerk's Office
(Office issuing permit)City or Town of Southborough Mass.Name of Decedent Norman E. Wellman

If a U.S. War Veteran, specify what war, organization, etc.

WWII

ENDORSEMENT

(To be filled in by cemetery or crematory official)

I hereby certify that the body accompanying this permit was
disposed of in accordance with its termsat Rural Crematory
(Name of cemetery or crematory) 180 Grove Street
(City or Town) Worcester, MA 01605
on SEP 25 2001

Final Disposition

Certified by John W. [Signature]
(Signature of Superintendent, cemetery or crematory)

If there is no officer in charge, funeral director must sign and return this stub.

**DISPOSITION, REMOVAL AND
TRANSPORTATION PERMIT***Stub to be retained by officer issuing permit*Name of Decedent Russell G. GmsdenSex M Date of Death Oct 27, 2001Place of Death SouthboroughDate of Birth December 3, 1919Immediate Cause Multiple Traumatic InjuriesCertifier Richard Evans M.D.Permit Issued To Michael S. Ciccarelli 01906Disposition At 549 Lincoln Ave. Scituate, MA
Puritan Lawn Mem Park
West Peabody, MAName of Facility Bisbee-Porcella Fun HomeDate Permit Issued October 30, 2001